

Please type a plus sign (+) inside this box +

PTO/SB/01 (10-00)

Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION AND POWER OF ATTORNEY FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) <input checked="" type="checkbox"/> Declaration Submitted with Initial Filing <input type="checkbox"/> Declaration Submitted after Initial Filing (Surcharge (37 CFR 1.16(e)) required) OR	Attorney Docket Number	961_006
	First Named Inventor	Michael W. LaCourt
	COMPLETE IF KNOWN	
	Application Number	Not assigned
	Filing Date	Concurrently herewith
	Group Art Unit	
	Examiner Name	

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

AUXILIARY SAMPLE SUPPLY FOR A CLINICAL ANALYZER

the specification of which

☒ is attached hereto

OR

☐ was filed on (MM/DD/YYYY) ___ as United States Application Number or PCT International Application Number ___ and was amended on (MM/DD/YYYY) ___

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

BEST AVAILABLE COPY

DECLARATION - Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

Application Serial No.	Filing Date	Status

I hereby appoint:

☒ Practitioners at Customer Number 20874 →

Place Customer
Number Bar Code
Label Here

AND

☐ Practitioner(s) named below:

Name	Registration Number	Name	Registration Number
Peter J. Bilinski	35,067	Catherine F. Gowen	32,148
Todd F. Volyn	37,463	Louis J. Cappezutto	37,107
Michael Stark	32,495	Philip S. Johnson	27,200
Steven P. Berman	24,772	Stacey B. Antar	39,595

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Address all telephone calls to Peter J. Bilinski at telephone number (315) 425-9000

Direct all correspondence to: ☒ Customer Number 20874 OR ☐ Correspondence address below

Name: Peter J. Bilinski

Address: Wall, Marjama & Bilinski

Address: 101 South Salina Street, Suite 400

City: Syracuse

State: NY

ZIP 13202

Country USA

Telephone: (315) 425-9000

Fax: (315) 425-9114

BEST AVAILABLE COPY

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) Michael W.

Family Name
or Surname LaCourt

Inventor's
Signature

Michael W. LaCourt

Date 11-JULY-2001

Residence: City Spencerport State NY Country U.S. Citizenship U.S.

Mailing Address 9 Walnut Hill Drive

City Spencerport State NY ZIP 14559 Country U.S.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SECOND INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) James David

Family Name
or Surname Shaw

Inventor's
Signature

James David Shaw

Date 11 JUL 01

Residence: City Hilton State NY Country U.S. Citizenship U.S.

Mailing Address 58 Hogan Point Road

City Hilton State NY ZIP 14468 Country U.S.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF THIRD INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) Michael

Family Name
or Surname Avdenko

Inventor's
Signature

Michael Avdenko

Date July 11, 2001

Residence: City Rochester State NY Country U.S. Citizenship U.S.

Mailing Address 42 Yorktown Drive

City Rochester State NY ZIP 14616 Country U.S.

BEST AVAILABLE COPY

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF FOURTH INVENTOR:				<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Lee William			Family Name or Surname David		
Inventor's Signature <i>Lee William David</i>			Date 7/11/01		
Residence: City Penfield		State NY	Country US	Citizenship US	
Mailing Address 25 Pond Valley Circle					
City Penfield		State NY	ZIP 14526	Country U.S.	

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF FIFTH INVENTOR:				<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Dale Robert			Family Name or Surname Ryan		
Inventor's Signature <i>Dale Robert</i>			Date 7/11/01		
Residence: City Fairport		State NY	Country US	Citizenship US	
Mailing Address 12 Walnut Run					
City Fairport		State NY	ZIP 14450	Country US	

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

BEST AVAILABLE COPY